

Exhibit I
(Appeal for Change of Grade Cover Sheet)

St. Matthews University School of Medicine

Appeal for Change of Grade Cover Sheet

Please submit this Cover Sheet with all other grievance paperwork
(Pages 1, 2 and typewritten statement) to:

Dr. R.N. Sreenathan
Dean of Student Affairs
rnsreenathan@smucayman.com

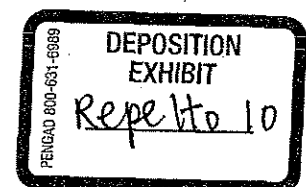
FAX: 1 345 945 3130

From: _____
Print email address

Per the SMU Student Handbook, an "Academic Grievance" is defined as a statement of complaint by a student relating to instruction and/or grading that a student perceives to be unfair or otherwise detrimental to the educational process at SMU. Issues relating to this concern may also include testing procedures, or the quality of instruction.

If you believe that you have grounds for an academic grievance, a concise typewritten statement noting the key issue(s) of the grievance as it pertains to the grade received in this course, along with the reasons explaining why these issue(s) should result in a change of grade, should be completed and returned to the Office of Student Affairs. The forms to be completed include pages 1 and 2. Your typed grievance letter will be Page 3 of your submitted paperwork.

Please read the Student Handbook relating to an appeal for a change of grade. If you need additional clarification of school policy governing students and their responsibilities in this appeals process please contact the Dean of Student Affairs.



Page 2

To: The Academic Grievance Committee

From: _____ Date: _____
(Name of Student)

Course: _____ Semester: _____

Grade Received: _____

Re: Request for Consideration of a Grade Change

I am requesting that the Academic Grievance Committee consider a grade change for the course noted above.

A detailed explanation of the reason(s) for this request is delineated on the following page(s). I understand that my grievance should be typed.

I have read the Student Handbook relating to a Grade Appeal and agree to abide by the policies relating to this matter.

I further state that I am providing to the Committee an objective description of the reason why I am making this request. Furthermore, the information supplied in this appeal is accurate and represents the facts to the best of my knowledge.

Signature

**St. Matthews University
School of Medicine
Appeal for Change of Grade**

Cover Sheet

Please submit this Cover Sheet with all other paperwork being submitted with your grievance (Pages 1, 2 and typewritten statement).

**To: Dr. Stephen Heller
Dean of Student Affairs
sheller@smucayman.com**

FAX: 1 345 945 3130

**From: _____
Print email address**

Per the SMU Student Handbook, an "Academic Grievance" is defined as a statement of complaint by a student relating to instruction and/or grading that a student perceives to be unfair or otherwise detrimental to the educational process at SMU. Issues relating to this concern may also include testing procedures, or the quality of instruction.

If you believe that you have grounds for an academic grievance, a concise typewritten statement noting the key issue(s) of the grievance as it pertains to the grade received in this course, along with the reasons explaining why these issue(s) should result in a change of grade, should be completed and returned to the Office of Student Affairs. The forms to be completed can be found on Page 2. Your typed grievance letter will be Page 3 of your submitted paperwork.

Please read the Student Handbook relating to an appeal for a change of grade. If you need additional clarification of school policy governing students and their responsibilities in this appeals process please contact the Dean of Student Affairs.

To: The Academic Grievance Committee

From: _____ Date: _____
(Name of Student)

Course: _____ Semester: _____

Grade Received: _____

Re: Request for Consideration of a Grade Change

I am requesting that the Academic Grievance Committee consider a grade change for the course noted above.

A detailed explanation of the reason(s) for this request is delineated on the following page(s). I understand that my grievance must be typed, and that handwritten paperwork will not be accepted by the Grievance Committee.

I have read the Student Handbook relating to a Grade Appeal and agree to abide by the policies relating to this matter.

I further state that I am providing to the Committee an objective description of the reason why I am making this request. Furthermore, the information supplied in this appeal is accurate and represents the facts to the best of my knowledge.

Printed Name of Student

Signature